Minutes: Vermont Blueprint for Health Payment Implementation Work Group

September 13, 2011, 1:00 PM

Attendees: Pam Biron, Carol Cowan, BCBSVT; Kevin Ciechon, Ann Collins, Gerhild Bjornson, CIGNA; Chrissie Racicot, HP-Medicaid; Lou McLaren, MVP; Jeff Ross, DVHA; Laura Hubbell, CVMC; Dana Noble, United Health Alliance; Maria Webb, Wendy Cornwall, BMH; Beth Steckel, FAHC; Elise McKenna, CHSLV; Julie Riffon, Tracy Paul, Chris Fortin, NCH; LaRae Francis, Gifford Hospital; Sarah Narkewicz, Marie Gilmond, RRMC; Laural Ruggles, NVRH; Nancy Thibodeau, Springfield Hospital; Crystal Thibodeau, Mt. Ascutney Hospital; Jean Cotner, Porter Hospital; Pat Jones, Blueprint.

MOU Status

The MOU has been signed by all payers. The effective date of the MOU is July 1, 2011 through June 30, 2013.

CMS Update

Pat will be sending an updated file to CMS by September 15, including scores for the September practices. CMS has decided to make CHT payments through one entity rather than providing different per beneficiary CHT payment rates for each HSA. That entity will be Northeastern Vermont Regional Hospital (NVRH). NVRH will make payments including core CHT and SASH to each CHT administrative entity, based on amounts provided by Blueprint staff. Laural indicated that the turnaround time would be fairly quick. There will be no need to invoice NVRH for the payments. Pat explained that the Support and Services at Home (SASH) program provides intensive services as an extension to core CHT activities to Medicare beneficiaries, through SASH hubs generally located at congregate housing sites. SASH funding is being provided by Medicare and is in addition to core CHT funding.

CHT Payment Update

A request for total unique patient numbers has been sent to project managers, along with specifications for developing those numbers. These reports are used to calculate CHT payment levels. The due date for the next report is September 19, so that they can be formatted and sent to the payers in advance of October 1. LaRae asked how to handle patients who have been seen at more than one of the practices. Pat replied that they should either use the most recent visit, or attribute the patient to the clinic with the most visits during the 24-month look-back period. These reports will be requested on a quarterly basis.

Advanced Primary Care Practice Scoring Schedule

Pat reviewed the scoring schedule and noted that the Rochester practice scoring date has been postponed from November 1 to January 1 because of flooding. December will be a particularly heavy scoring month, with ten new practices scheduled. January will mostly be focused on re-scoring of existing practices. Lou asked about the Little City practice, scheduled to be scored on 12/15/11. She noted that it would be difficult for MVP to pay for part of a month. Jean indicated that as long as the scoring occurred in December using 2008 NCQA standards, the practice would be comfortable with payment starting effective January 1. Payers indicated that additional information that would be useful on the scoring schedule would be address, town, zip code, NPI number and Tax ID number.

Payment Implementation Calendar

Pat reviewed the September through January Payment Implementation Calendar, and outlined key deadlines in September and October.

Credentialing Tracking

The August 9 minutes include a summary of the decision regarding credentialing tracking. Insures will track credentialing; providers will become active when they are credentialed and enrolled in the health plan.

Per Diem Providers

Pat will set up an off-line call to discuss per diem provider issues with the payers and FAHC representatives.

Self-Insured Patients

Pam reported that BCBSVT sends a list of self-insured plans with their patient attribution packets; if project managers or practices want another copy of that list, they can request it from BCBSVT. Lou said that MVP would be providing lists to project managers, and Kevin said that CIGNA would do the same. In addition, Laura discovered that the Vermont Department of Labor has at least a partial list of self-insured employers at http://labor.vermont.gov/Default.aspx?tabid=272.

Dana reported that she uses information about self-insured employers for planning, but that she has also used it to successfully encourage self-insured employers in her area to voluntarily provide PPPM payments to Blueprint-participating practices.

Meeting Schedule

The group continues to be supportive of a monthly meeting schedule, but several indicated that Wednesdays would be much better, ending before 3:00 PM. Pat will look at the schedule and attempt to schedule the remaining 2011 meetings for Wednesdays.